

NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 85413-640296 (020035-001100US)	
I hereby certify that this correspondence is being transmitted to the USPTO via EFS-Web on <u>4/14/11</u> Signature <u>/Linda Shaffer/</u> Typed or printed name <u>Linda Shaffer</u>		In re Application of Robert Chow et al.	
		Application Number 09/998,832	Filed November 29, 2001
		For STEM CELL SCREENING AND TRANSPLANTATION THERAPY FOR HIV INFECTION	
		Art Unit 1632	Examiner Anoop Kumar Singh

Applicant hereby **appeals** to the Board of Patent Appeals and Interferences from the last decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$ 540

- ☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ 270
- ☐ A check in the amount of the fee is enclosed.
- ☒ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Director has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 20-1430.
- ☒ A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the

- ☐ applicant/inventor. /Eugenia Garrett-Wackowski, Reg. No. 37,330/
Signature
- ☐ assignee of record of the entire interest.
See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed.
(Form PTO/SB/96) Eugenia Garrett-Wackowski
Typed or printed name
- ☒ attorney or agent of record.
Registration number 37,330 925-472-5000
Telephone number
- ☐ attorney or agent acting under 37 CFR 1.34.
Registration number if acting under 37 CFR 1.34. _____ 4/14/11
Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.